

Female Breast Cancer

Breast cancer is the most common type of cancer among women in the United States. More than 180,000 women are diagnosed with breast cancer each year. In Nebraska, between 1996 and 2000, approximately 6,000 women were diagnosed with malignant breast tumor and 1,300 died from it. The exact cause of breast cancer is not known. However, studies show that the risk of female breast cancer increases with age. Risk is higher in women with a personal or family history of breast cancer, biopsy confirmed atypical hyperplasia, a long menstrual history (menstrual period that started early and ended late in life), obesity after menopause, women who never had children or had a first children after age 30 or who consume one or more alcohol beverages per day. The inherited susceptibility genes BRCA 1 and BRCA 2 account for approximately 5% of female breast cancer cases. This disease is very uncommon in women under the age of 35. Most breast cancers occur in women over the age of 50 and the risk is especially high for women over age 60.

Breast cancer screening with a mammogram has been shown to be the best tool available for finding breast cancer early even before the symptoms appear. This can significantly decrease the risk of dying from breast cancer. A clinical breast exam by a physician and self-examination of the breast are also important for early detection of breast cancer.

Breast Cancer Incidence

In 2001, 178 new cases of female breast cancer were diagnosed for every 100,000 women in Lancaster County. The incidence rate has increased since 1990 (Figure 14). This trend was consistent with the incidence trends for both the State and the Nation, although, rates for the County and the Nation were slightly higher than the incidence rates for the State (Figure 15).

Figure 14: Female Breast Cancer Incidence Rates
Lancaster County (1990-2001)

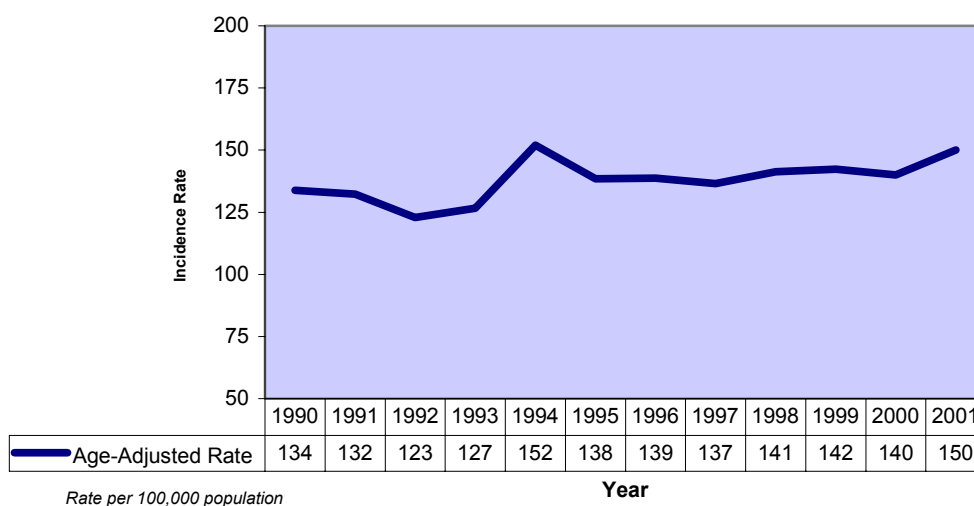
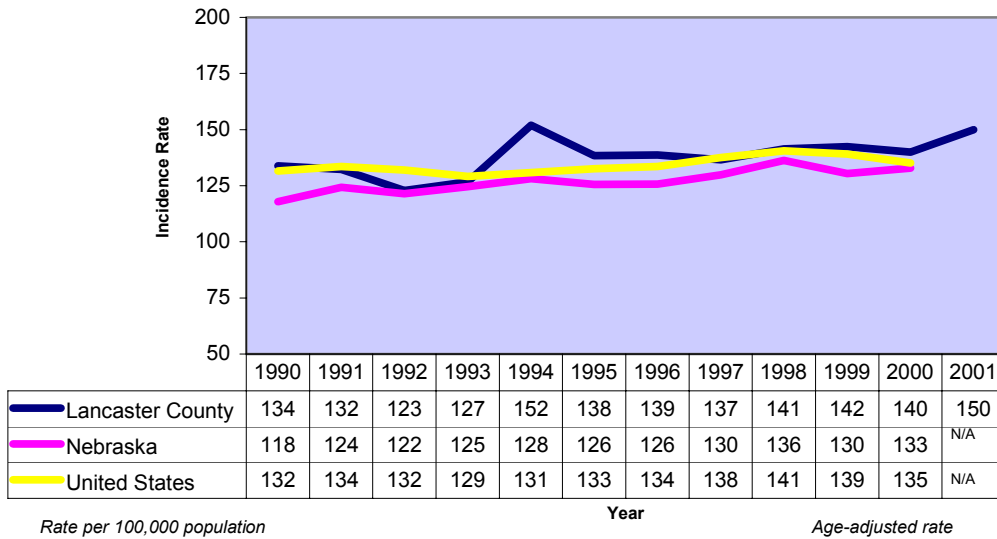


Figure 15: Female Breast Cancer Incidence
Lancaster County, Nebraska & US (1990-2001)

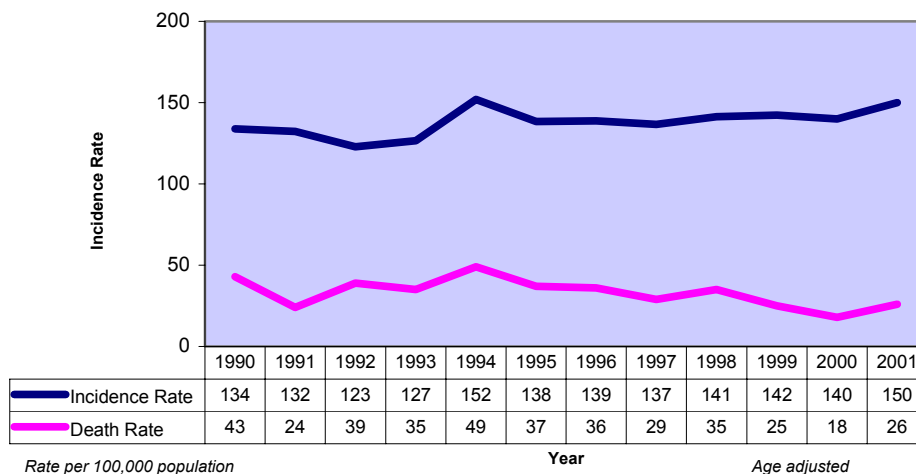


Source: Lincoln-Lancaster County Health Department

Breast Cancer Deaths

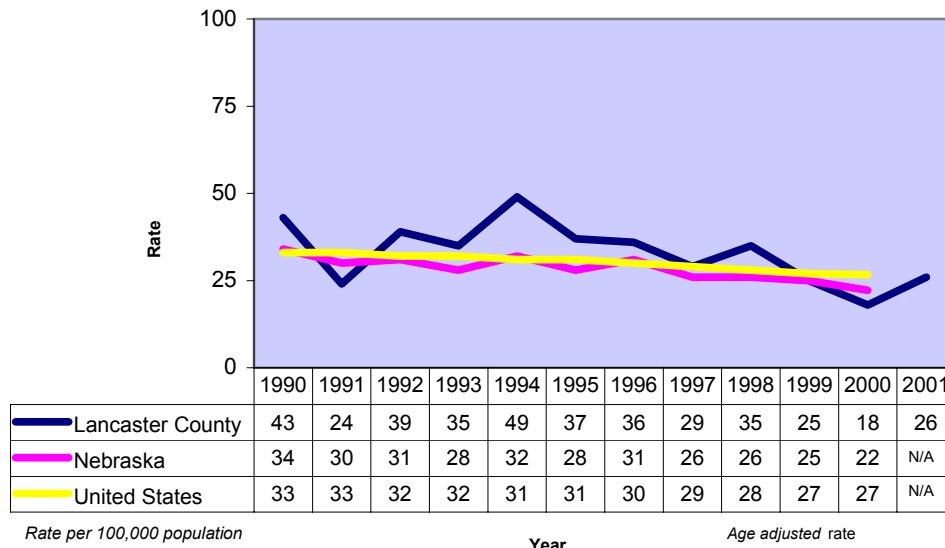
Figure 16 shows the comparison between the breast cancer incidence and death rate in the County. Death due to breast cancer was less despite a very high incidence rate, probably because of early detection and availability of advanced medical treatment. This further strengthens the importance of clinical and self-breast examination and mammogram screening for women over 40 years of age. Similar trends in breast cancer death were observed in the State and the Nation (Figure 17).

Figure 16: Female Breast Cancer Incidence & Death Rate
Lancaster County (1990-2001)



Source: Lincoln-Lancaster County Health Department

Figure 17: Female Breast Cancer Death Rate
Lancaster County, Nebraska & United States (1990-2001)



Source: Lincoln-Lancaster County Health Department

Public Health Implications:

Early detection of female breast cancer through known screening procedures saves lives and increases treatment options for this disease. The American Cancer Society recommends that women 40 and over should have an annual mammogram, an annual clinical breast examination (CBE) by a health care professional and should perform monthly breast self-examinations (BSE). Women aged 20-39 should have a clinical breast examination by a health care professional every three years and should perform monthly breast self-examinations.* During 2000, 61.9% of women over 40 in Nebraska had a mammogram

In Nebraska, the Every Woman Matters Program (EWM) provides affordable, quality breast and cervical cancer screening for low to moderate income women aged 40-64 who are uninsured or under insured. This program, developed in 1990 by the Centers for Disease Control and Prevention, is also known as the National Breast and Cervical Cancer Early Detection Program. The Nebraska Medicaid Treatment Bill, passed during the 2001 legislative session, provided Medicaid treatment coverage for women screened in the EWM program who are diagnosed with cancer or pre-cancer of the breast or cervix. The addition of the Wisewoman (Well Integrated Screening and Evaluation for Women Across the Nation) component in 2002 includes cardiovascular and diabetic screening and programs promoting lifestyle change to prevent or reduce health risks. Educational efforts provided through EWM, the American Cancer Society and various community collaborators are key in promoting breast cancer awareness and referral to resources within the community.

**As of May, 2003, these recommendations have changed to yearly mammograms starting at age 40 and continuing as long as a woman is in good health, clinical breast exams about every 3 years for women in their 20's and 30's and every year for women 40 and over. Breast self-exams are optional for women starting in their 20's. Women should report any breast change promptly to their health care provider.*